Department of Labor and Industries Electrical Licensing PO Box 44460 Olympia WA 98504-4460 www.Lni.wa.gov



## REQUEST FOR CHANGE OF ADDRESS

List all the certificate or license numbers that you wish to have the address changed on. If you hold more than one license or certificate you must supply each number you want updated.

\*\* We will only change the address on the numbers that you have listed. \*\*

You may either mail to the above address or fax to 360-902-5296 (faxed forms do not need to be mailed).

| Name of lice       | ense or certificate holder         |               |   |          |
|--------------------|------------------------------------|---------------|---|----------|
| Electrician c      | certificate number                 |               |   |          |
| Administrate       | or certificate number              |               |   |          |
| Master Elec        | trician certificate number         |               |   |          |
| Electrical tra     | ainee certificate number           |               |   |          |
| Electrical co      | ontractor license number           |               |   |          |
| Electrical co      | ontractor UBI#                     |               |   |          |
|                    |                                    |               |   |          |
| The new address    | is                                 |               |   |          |
| Mailing/street a   | address                            |               | Apartment or Suite #  |          |
| City               |                                    | State         | ZIP+4   |          |
| Phone number       | (Required for electrical contracto | Email address | (You will be signed up for the electrical listse can get updates & notices about the electrical including the monthly Electrical Currents new | industry |
| Signature of licen | se or certificate holder           |               |   |          |